

Arizona Department of Health Services Office For Children With Special Health Care Needs Children's Rehabilitative Services Administration	<b>Effective Date: 03/01/2007</b> <b>Last Review Effective Date:</b> <b>02/13/2008</b>
<b>SUBJECT:</b> Medical and Utilization Management	<b>SECTION:</b> MM/UM 1.1

<b>SUBTITLE:</b> Detection of Over- and Under- Utilization of Services
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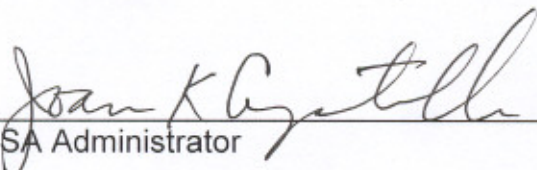

**POLICY:**

It is the policy of the Children's Rehabilitative Services Administration (CRSA) to monitor for over- and under-utilization of services.

**PROCEDURE:**

- 1) The following are reviewed for over- and under-utilization of services:
  - a) Monthly Children's Rehabilitative Services (CRS) Contractors' adjudicated encounters:
    - i) Inpatient services;
    - ii) Ambulatory surgical services;
    - iii) Emergency services.
  - b) Quarterly CRS Contractors' adjudicated encounters:
    - Readmissions within thirty (30) days;
  - c) Monthly pharmacy data and quarterly pharmacy report;
  - d) Quarterly durable medical equipment (DME) report;
  - e) Quarterly utilization data;
  - f) Annual CRSA utilization report;
  - g) Other reports or sources as identified.
- 2) CRSA delegates certain Medical Management/Utilization Management (MM/UM) services to CRS Contractors and provides oversight by conducting periodic site visits and annual administrative review. A site visit report is prepared for each site following each site visit; report is submitted to and approved by MM/UM Committee and subsequently submitted to the Arizona Health Care Cost Containment System (AHCCCS). In addition, CRSA MM/UM shares reports with CRS Contractors. MM/UM delegated services are as follows:
  - a) Prior Authorization;
  - b) Concurrent Review;
  - c) Retrospective Review.
- 3) The data/reports are evaluated and analyzed.
  - a) Trends in utilization data are presented to the MM/UM Committee;
  - b) The MM/UM Committee identifies potential over- and under-utilization;

- c) The MM/UM Committee discusses and evaluates each report; action is taken if necessary.
- 4) For identified over- and under-utilization CRS Contractors are asked to provide a response. If needed, a corrective action plan (CAP) is initiated.
- 5) If indicated, the CAP is monitored until desired outcomes are achieved.
- 6) Findings are presented to the CRSA Executive Management Committee.

Approved:	Date:
 CRSA Administrator	<u>2/18/08</u>
 CRSA Medical Director	<u>2/19/08</u>